Affidavit of Authority to Receive Title(s) and/or Title Documents for a Company, Corporation or Partnership

The	
(Name of Company, Corporation or Partnership)	
(Street Addre	ss)
(City, State &	Zip)
Hereby certifies that	
(Typed or Printed Full Leg	al Name of Appointed Attorney-in-Fact)
Has the authority to receive delivery of titles above named company, corporation or partr	
Sworn to and subscribed before me	
This, of, 2, (Month) (Year)	
(Day) (Month) (Year)	(Printed Name)
(Notary Public Signature & Notary Seal or Stamp)	(Signature)
(Date Notary Commission Expires)	(Position or Job Title)

This form must be signed under oath by an officer, partner or owner of the company, corporation or partnership.

Note: The State Motor Vehicle Division only holds powers of attorney on file one (1) year from the receipt date in our Customer Service Operations Section. The above named attorney-in-fact will be required to submit two (2) **original** powers of attorney in-person to the Motor Vehicle Division. At that time, one (1) of the two (2) **original** powers of attorney will be returned to the submitter with a stamp affixed indicating that it is on file with the Motor Vehicle Division for one (1) year from the receipt date. The attorney-in-fact, will then be required to submit a legible valid copy of this 'stamped' power of attorney with <u>each</u> set of documents where he/she is authorized to pick-up title(s) or title documents on behalf of your company, corporation or partnership.

Any alteration or correction voids this form.